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DECLARATION AND POWER OF ATTORNEY

In Re Application: Goux

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am an original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: A SYSTEM AND METHOD FOR IMPROVING THE OPERATION OF A BUSINESS ENTITY AND MONITORING AND REPORTING THE RESULTS THEREOF, the specification of which:

is at	ttached hereto.	as Application No	(if applicable)	and was amended on	
I hereby state that I have by any amendment referr States of America before thereof or more than one the United States of Ame good faith toward the Po	reviewed and understa ed to above. I do not l my invention thereof, year prior to the date of erica more than one yea atent and Trademark	and the contents of the know and do not belie or patented or describ of this application. It ar prior to the date of Office, and I acknow	above-identified specificative that the same was ever led in any printed publicatifurther state that the invention of this application. I understand	ation, including the claims, known or used by others it ion in any country before nation was not in public use stand that I have a duty of the information which is ma	n the United ny invention or on sale in candor and
inventor's certificate liste	d below, and have also	identified below any	foreign application for pa	the foreign application(s) that or inventor's certificate fore that of the application	te disclosing
Application No.	Application No. Country Filing Date		Priority Claimed Under 35 USC §119		
None			Yes	No	
national or PCT internation	ational or PCT international filing date of this application: Application Serial No. Filing Date		me available between the filing date of the prior application and the Status: patented, pending, abandoned		
I further declare that all s are believed to be true;	and further that these sine or imprisonment, or	statement were made r both, under Section	with the knowledge that v 1001 of Title 18 of the Ur	ements made on information willful false statements and that	I the like so
POWER OF ATTORNEY:	I hereby appoint Troutm	nan Sanders LLP, having	g a Customer Number of 006	5980, and the attorneys and a usiness in the Patent and Trad	
	TROUTMAN SAND 600 Peachtree Street, N Atlanta, Georgia 3030	I.E., Suite 5200	Direct telephone cal Gregory Scott Smith	lls at (404) 885-3354 to: h	
Full name of sole or first i	nventor Gouy Timot	hy Gayle	Citizenship: US		
	nventor. Goux, rimot	ily Gayle	Ciuzensinp: Os		
Inventor's signature	12		Date: 10.18	2 041	
Residence and Post Office	Address: 2045 High	way 59, Mandeville, L		-001	